

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | J3 | | 15-15-01 |
| O.I.P.E. CLASSIFIER | LR | 32 | 6P |
| FORMALITY REVIEW | SJ | 1021 | 07/20/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 10/4/01 |
| 2 | ✓ | ✓ | 10/25/01 |
| 3 | ✓ | ✓ | 10/25/01 |
| 4 | ✓ | ✓ | 10/25/01 |
| 5 | ✓ | ✓ | 10/25/01 |
| 6 | ✓ | ✓ | 10/25/01 |
| 7 | ✓ | ✓ | 10/25/01 |
| 8 | ✓ | ✓ | 10/25/01 |
| 9 | ✓ | ✓ | 10/25/01 |
| 10 | ✓ | ✓ | 10/25/01 |
| 11 | ✓ | ✓ | 10/25/01 |
| 12 | ✓ | ✓ | 10/25/01 |
| 13 | ✓ | ✓ | 10/25/01 |
| 14 | ✓ | ✓ | 10/25/01 |
| 15 | ✓ | ✓ | 10/25/01 |
| 16 | ✓ | ✓ | 10/25/01 |
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| 27 | ✓ | ✓ | 10/25/01 |
| 28 | ✓ | ✓ | 10/25/01 |
| 29 | ✓ | ✓ | 10/25/01 |
| 30 | ✓ | ✓ | 10/25/01 |
| 31 | N | N | N |
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If more than 150 claims or 10 actions
staple additional sheet here

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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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